# FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

# FORM D

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL						
OMB Number:	3235-0076					
Expires:						
Estimated average burden						
hours per respons						

SECI	JSE ONLY
Prefix	Serial
DATE	RECEIVED

Name of Offering ( Check if this is an amenumer	it and name has changed, and indicate change.)	
Private Placement of Limited Partnership Inter-	est	
Filing Under (Check box(es) that apply): Rule Type of Filing: New Filing Amendment	504 Rule 505 Rule 506 Section 4(6)	☐ ULOE
	A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer		05072984
Name of Issuer ( check if this is an amendment as	nd name has changed, and indicate change.)	
MBD-CLP II, LP		
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
4543 Post Oak Place Drive, Susite 231, Housto	n, TX 77027	713.871.8766
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Gode)
Brief Description of Business	DEC 0 8 2005	NOV
	partnership, already formed of other (partnership, to be formed	please specify):
Actual or Estimated Date of Incorporation or Organiza: Jurisdiction of Incorporation or Organization: (Enter t	نبا ليسلسكن تليكيا	nated SECTION OF THE PROPERTY

### GENERAL INSTRUCTIONS

### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee,

### State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION-

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filling of a federal notice.

BW

## A. BASIC IDENTIFICATION DATA าส เฉลียนเห็นได้เลี้ย Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer, Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Beneficial Owner Executive Officer Promoter Managing Partner Full Name (Last name first, if individual) MBD-CLP GP, LLC Business or Residence Address (Number and Street, City, State, Zip Code) 4543 Post Oak Place Drive, Suite 231, Houston, Texas 77027 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Managing Partner Full Name (Last name first, if individual) McDonald, Paul S. Business or Residence Address (Number and Street, City, State, Zip Code) 5426 Buffalo Speedway, Houston, Texas 77005 General and/or Beneficial Owner Executive Officer Director Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Brown, Larry P. Business or Residence Address (Number and Street, City, State, Zip Code) 8403 Burkhart Road, Houston, Texas 77055 Promoter | Director Check Box(es) that Apply: ☐ Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Ali Daneshy Business or Residence Address (Number and Street, City, State, Zip Code) 25 Hollinger's Island, Houston, Texas 77450 Beneficial Owner Executive Officer General and/or Check Box(es) that Apply: Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Beneficial Owner Executive Officer General and/or Check Box(cs) that Apply: Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: General and/or Promoter Beneficial Owner Executive Officer Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

					В. 1	NFORMAT	ION ABOI	T OFFER	ING				
ı.	Has the	issuer sol	d, or does t							-		Yes	No E
	Answer also in Appendix, Column 2, if filing under ULOE.  What is the minimum investment that will be accepted from any individual?									e 34.682.10			
2.	What is	the minin	um investr	nent that v	vill be acce	epted from	any indivi	วับอา7	************		***************	<b>3</b>	<u></u>
3.			permit join									Yes	No
4.	commiss If a perso or states	sion or sim on to be lis , list the n	ilar remune sted is an as:	ration for s sociated pe troker or de	solicitation erson or age ealer. If me	of purchasent of a bro ore than fiv	ers in conn ker or deale e (5) perso	ection with er registere ns to be list	sales of sec d with the S ted are asso	curities in t EC and/or	lirectly, any the offering. with a state sons of such		
Full	Name (I	ast name	first, if ind	ividual)									
Bus	iness or F	Residence	Address (N	lumber and	Street, C	ity, State, 2	(ip Code)						
Nam	ne of Ass	ociated Br	oker or De	aler		·							
State	es in Whi	ch Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	All States	or check	individual	States)					**1*********	***************************************	□ Al	States
	AL YL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK W1	HI MS OR WY	MO PA PR
Full	Name (L	ast name	first, if indi	vidual)			· · · · · · · · · · · · · · · · · · ·					·	
Busi	ness or l	Residence	Address (N	lumber an	d Street, C	ity, State,	Zip Code)						
Nam	e of Asso	ociated Br	oker or De	aler		<del></del>				· · · · · · · · · · · · · · · · · · ·			
State	s in Whi	ch Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers				<del></del>		<del></del>
	(Check "	Ali States	" or check	individual	States)			**********	*************		**************	☐ All	l States
ļ	AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	LA NM UT	ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Full	Name (L	ast name 1	first, if indi	vidual)									
Busi	ness or I	Residence	Address (N	lumber an	d Street, C	ity, State, 2	Zip Code)	<del> </del>			_ <del></del>		
Nam	c of Asso	ciated Br	oker or Dea	aler			••••••				******		Name
State	s in Whi	ch Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
			" or check							********	************************	□ All	l States
	AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF I	ROCEEDS	
١.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	<b>S</b> _	\$
	Fquity		
	Common Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests		
	Other (Specify)		,
	Total		s 1,109,840.00
	Answer also in Appendix, Column 3, if filing under ULOE.	·	<b>*</b>
	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	18	\$ <u>1,109,840.00</u>
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
		Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$ 0.00
	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		S
	Printing and Engraving Costs		\$
	Legal Fees		\$ 6,000.00
	Accounting Fees	_	\$ 2,000.00
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify) Finders' Fee	_	\$ 45,000.00
		استنسا	***********

	COLERBING BDICE NO	MBER OF INVESTORS, EXPENSES AND USE	OF BROCEFOR	
	MANAGEMENT OF PERING PRICE, NO.	oider of investors, expenses and use.	OF FRUCELUS	
4	b. Enter the difference between the aggregate off and total expenses furnished in response to Part C - proceeds to the issuer."	- Question 4.a. This difference is the "adjusted g	ross	\$_1,056,840.00
6	indicate below the amount of the adjusted gross peach of the purposes shown. If the amount for a check the box to the left of the estimate. The total proceeds to the issuer set forth in response to Pa	any purpose is not known, furnish an estimate of the payments listed must equal the adjusted g	and	
			Payments to Officers, Directors, & Affiliates	Payments to Others
5	Salaries and fees		\$ 30,000.00	Пѕ
	urchase of real estate		<del>-</del>	
r	rurchase, rental or leasing and installation of mand equipment	ochinery		
	Construction or leasing of plant buildings and fa	scilities		s
0	ecquisition of other businesses (including the vifering that may be used in exchange for the assuer pursuant to a merger)	sets or securities of another	[] <b>\$</b>	
F	epayment of indebtedness		[] \$	<u> </u>
V	Vorking capital	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	🗀 💲	s
C	Other (specify):		_ 🗆 \$	
_			\$	s
C	olumn Totals	nthananaantan <del>aa</del> aantaanaanaanaanaanaanaanaanaanaanaanaan	30,000.00	1,026,840.0
T	otal Payments Listed (column totals added)		s <u>1,</u>	056,840.00
; ;		D. FEDERAL SIGNATURE		
ie is: gnat	suer has duly caused this notice to be signed by th ure constitutes an undertaking by the issuer to fo formation furnished by the issuer to any non-ac	e undersigned duly authorized person. If this no irnish to the U.S. Securities and Exchange Con	otice is filed under Ru imission, upon writte	
suer	(Print or Type)	Signature OCO 1 1	Date	
80.	CLP II, LP	Secretary	November 16, 2	005 .
ame	of Signer (Print or Type)	Title of Signer (Print or Type)		
	. McDonald	President of MBD-CLP GP, LLC, its Gene		

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E. STATE SIGNATURE		
1. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No <b>SZ</b> T

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type) MBD-CLP II. LP	Signature Date November 16, 2005
Name (Print or Type)	Title (Print or Type)
Paul S. McDonald	President of MBD-CLP GP, LLC, its General Partner

### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

			5 (A CA)	AI	PPENDIX		-:		
-	Intend to non-a investor	2 d to sell accredited as in State (-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pu	4 f investor and irchased in State C-Item 2)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL		,						,	
AK									
AZ									
AR									
CA	:								
CO								,	
СТ	·								
DE									
DC									
FL									<u>                                     </u>
GA									
HI									<u> </u>
ID		<u> </u>						1	<del></del>
IL									
IN		[						<u>                                     </u>	
IA KS		(						1	1
KY	=======								
LA		}						[	
ME		<del> </del>						· [	-
MD		(						!	
МА	***************************************								
МІ	:							<b> </b>	
MN									
MS								<u> </u>	
	<u></u>	<u> </u>	l					1	l

				API	PENDIX				
1	to non-a	d to sell accredited as in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
мо								J	
МТ									
NE									
NV									
NH	,								
ŊJ		:							
NM		***************************************							
NY									, , ,
NC									
ND									
он			(						!
ок									1
OR									
PA									
RI									
sc									
SD									
אד									
TX	,	×	1,109,840.00	18	\$1,109,840.	O	\$0.00		×
UT									
VT									
VA									
WA									
wv									
W١									

				APP	ENDIX				
1	Intend to sell to non-accredited investors in State (Part B-ltem 1)  Type of security and aggregate offering price offered in state (Part C-ltem 1)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
WY									
PR									